

**BEHAVIORAL HEALTH & HOMELESSNESS
STATEWIDE UNIFIED RESPONSE GROUP
(BHHSURG)**

COVID-19 UPDATE

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March 30th, 2020

Call Topics and Focus

- Welcome to Domestic Violence providers!
- Updates on:
 - Administrative/guidance document
 - Telehealth
 - PPE
 - Quarantine/Isolation
- Presentation: Dr. Toma from DHS

Behavioral Health and Homelessness Statewide Unified Response Group

- DOH/BHA, Governor's Coordinator on Homelessness (GCH), DHS/HPO, and Counties
- Aimed at linking and syncing COVID-19 response related to
 - Response efforts
 - Response policies
 - Response services
 - Response resources
 - Response messaging and information.
- In a crisis, coordinated effort and coordinated communication is **KEY**

Operational Tempo

- Weekly calls (Mondays: 11:00am – 12:00pm)
- Central website: <https://bhhsurg.hawaii.gov>
 - Repository of information and resources
 - Link: Ability to submit questions and get answers daily
 - Direct email also available: DOH.BHA.BHHcovid19response@doh.hawaii.gov
 - Linked to **hawaiicovid19.com** and **homelessness.hawaii.gov**
 - Possibility for email updates/newsletter (sign up to be notified via the website)
- Ongoing coordination of tasks, efforts, and resources

Administrative, Contractual, and Regulatory Issues

- Guidance will be released shortly on the website. Thank you for your patience!

Operations in a COVID-19 Environment – Remote vs. Face-to-Face Services

- Given current CDC recommendations on infection control and social distancing, telehealth is the best option for services.
- A telehealth flowchart has been posted on the website to help determine what is the best possible mode of service delivery for a client.

Operations in a COVID-19 Environment – Infection Control

- You are (or should) already be practicing infection control every day.
- A PPE flowchart will be available on the website soon which will help guide providers on the type of PPE that is recommended as well as alternatives.

Operations in a COVID-19 Environment – PPE Supply Chains

- Thank you for responding to the survey to better understand your PPE needs
- These responses are being compiled and will be submitted to HiEMA and other agencies.
- If you were unable to complete the survey, please submit a request to:
- DOH.BHA.BHHcovid19response@doh.hawaii.gov

SOURCE: CDC

Operations in a COVID-19 Environment – Alternative PPE

- Alternative PPE solutions:
 - **Hand sanitizer:**
 - Soap and water is sufficient
 - **Cleaning supplies:**
 - 1 to 10 diluted bleach solutions, alcohol-based sanitizer, and other EPA disinfectant products
 - **Facemasks:**
 - Reuse facemasks if available.
 - Daily washed handkerchiefs, bandanas, and other clothing can be used as a last resort if properly covering both the mouth and nose.
 - **Physical barriers**
 - Plastic and other material can be used to create physical barriers between people
 - Sleeping arrangements of head-to-toe
 - Provide services in well-ventilated areas including outside tented areas, “drive through” options, etc.

SOURCE: CDC

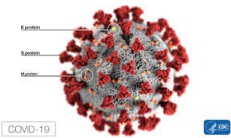
Operations in a COVID-19 Environment – Quarantine vs. Isolation

- **Quarantine:** Persons exposed or potentially exposed
- **Isolation:** Persons exhibiting symptoms (does not have to be confirmed COVID-19 infection)
- Inpatient and housing programs need to have isolation and quarantine measures in place
 - Refer to joint guidance released by DOH, DHS, and Office of the Governor's Coordinator on Homelessness on March 23rd, 2020
- Kaaahi Street Updates

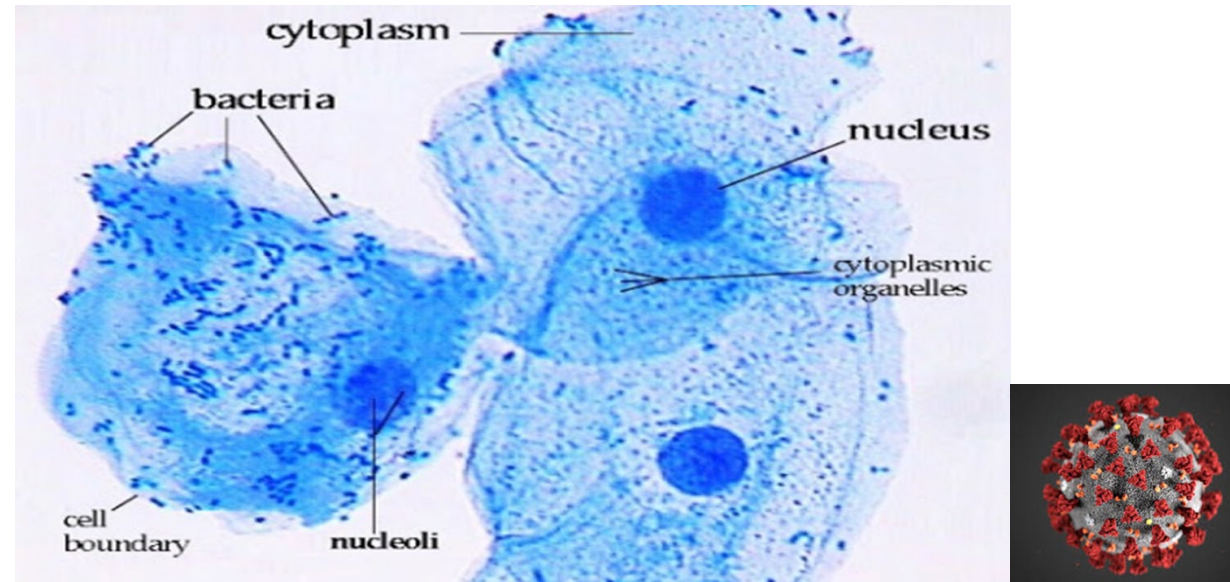
Covid-19 Primer Facts vs Fiction

March 26, 2020
Curtis Toma, MD
Med-Quest Medical Director

“The only thing we have to fear is fear itself” FDR



Terminology: More Informed Than Media



Coronavirus = Class of virus. Seven different coronavirus, one subtype cause Covid-19

Covid-19 = Name of Disease

SARS-CoV-2 = Name of Virus

Flu is an infectious disease caused by the Influenza virus.

COVID-19 is an infectious disease caused by the SARS-CoV-2 virus.

Naïve Population

Covid 100% population Naïve vs Flu with 2/3 elderly immunized for influenza.

At minimum Covid 3x susceptible elderly population vs Flu.

Coronavirus (7)

- 4 Coronavirus > common cold (URI)
 - Second most common cause of the common cold after rhinovirus.
- 3 Novel Coronavirus (All 3 Zoonotic Disease)
 - SARS (2002): Origin Bats > Civets > Human
 - MERS (2012): Origin Bats > Camel > Human
 - SARS-CoV-2 (2019): **Origin Bats > ? Host > Human**



Covid-19 vs Flu

U.S.	Cases	Hosp	Deaths
Flu	40 – 60 M	400 – 800 K	30 – 60 K
Covid-19	140 K	?	2.5 K

Influenza Pandemic (1968)			100 K
Influenza Pandemic (1957)			115 K
Spanish Flu Pandemic (1918-1919)			675 K

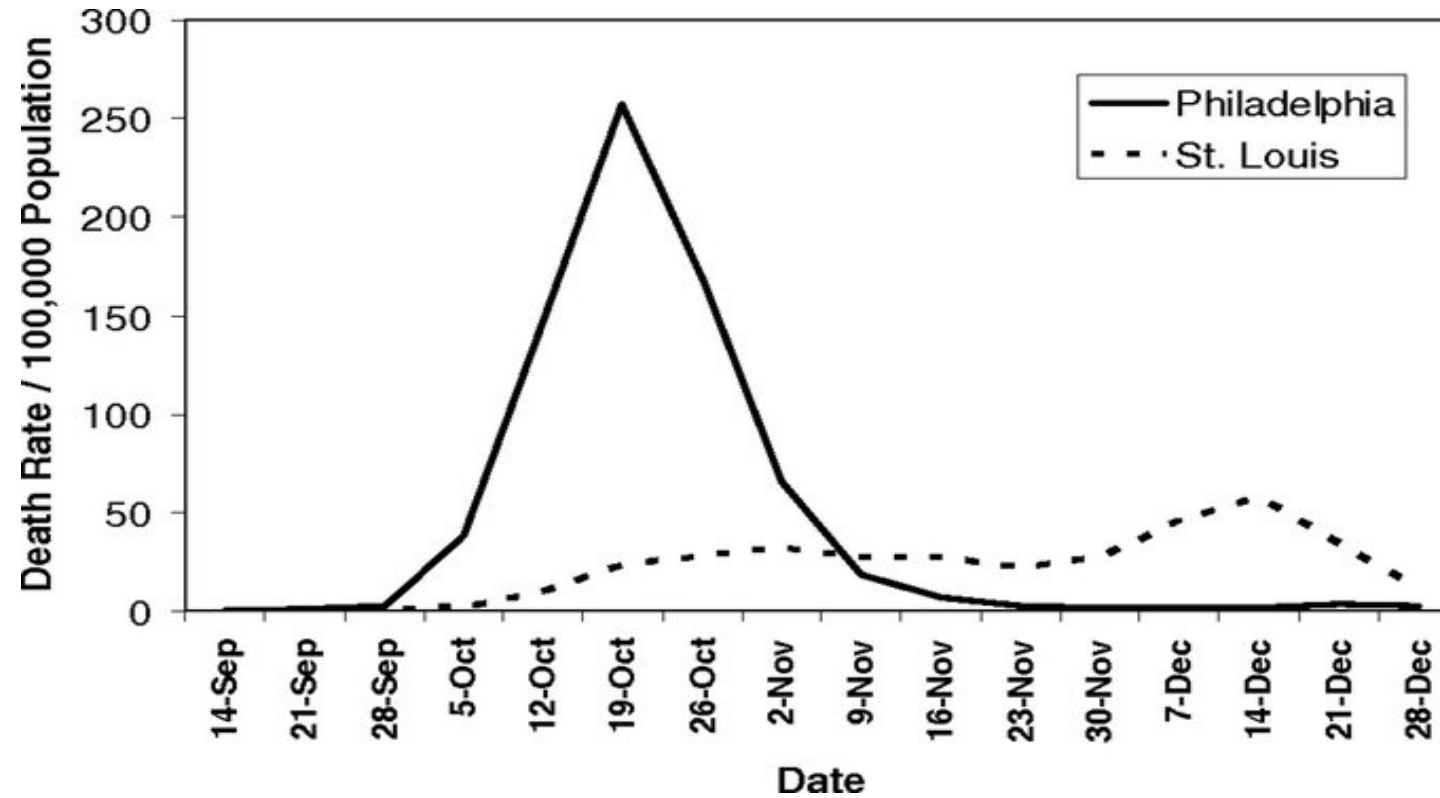
Hawaii (Oahu)	Cases	Hosp	Deaths
Flu	100,000	1200/yr	~100-150/yr
Covid-19	175	12	0

Assumptions:

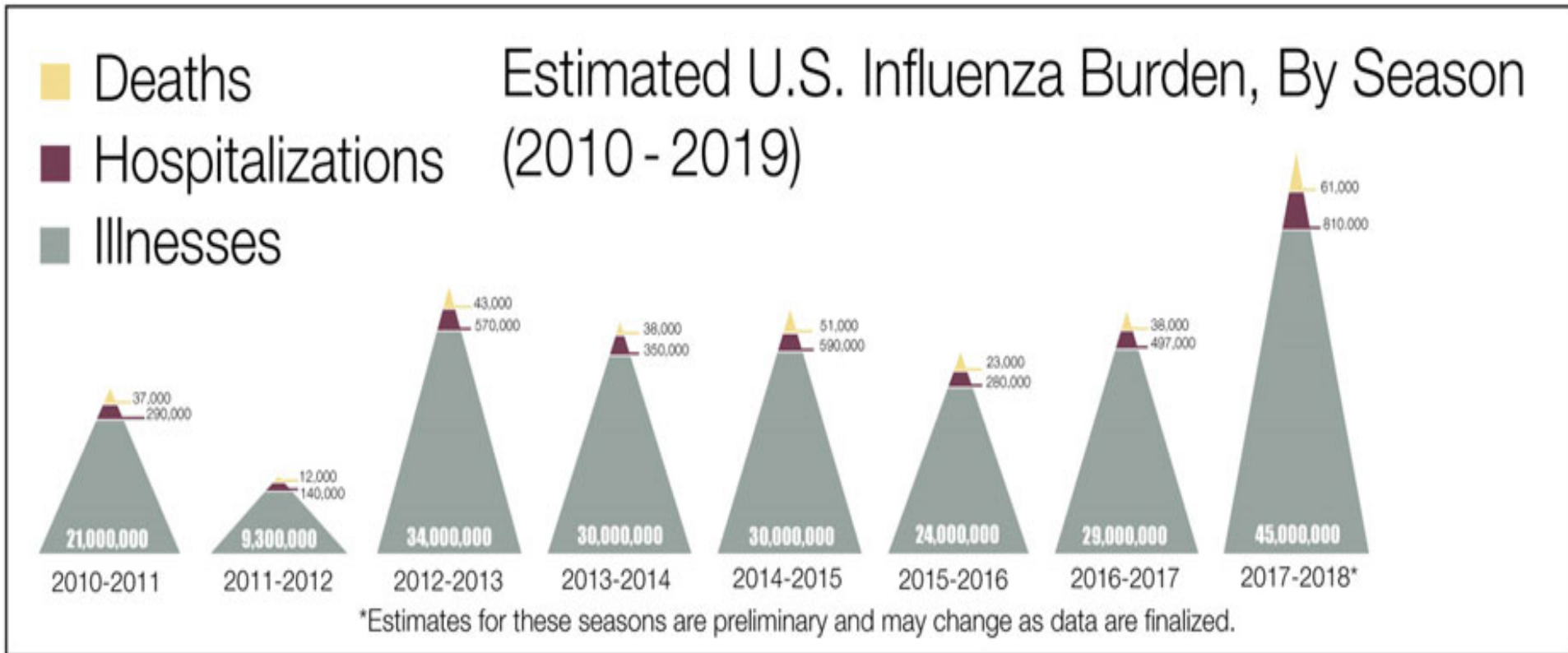
- Influenza cases 10% of population, hosp 1-2% cases, deaths 10% hosp
- Influenza 2/3 elderly immunized, Covid no immunization to date (Naïve population)
- Covid 3x susceptible elderly population vs influenza
- Influenza = season, Covid-19 = compressed timeline (Naïve)
- Covid all Resp, stress to Resp infrastructure (PPE, Vent)
- Covid more infectious and more lethal than influenza

Influenza (U.S.) Deaths estimated from past 3 years CDC data

1918 Spanish Flu Pandemic



Flu compared to Covid-19

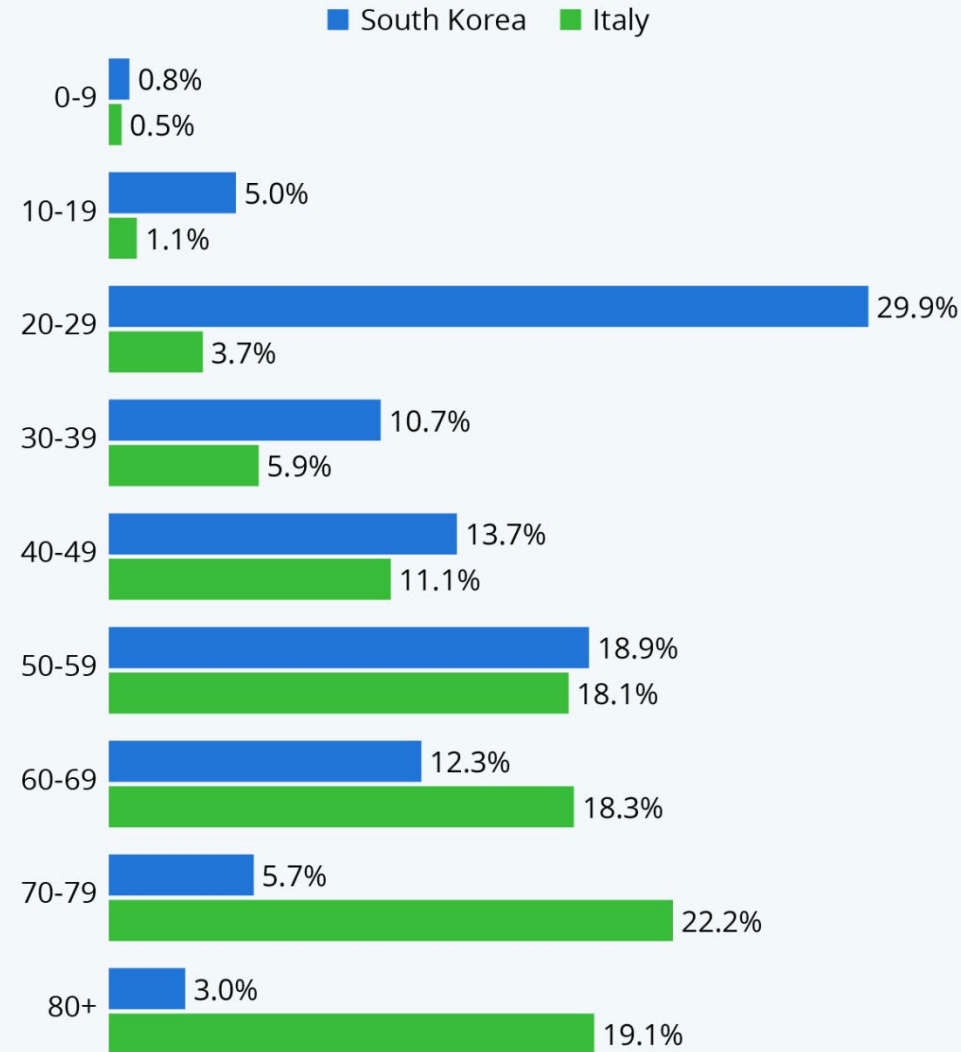


Influenza (Flu) Case Fatality Rate is typically 0.1-0.2%
2019-20: 26M cases, 250K hospitalized, 14K deaths

Source: CDC www.cdc.gov/flu/about/burden/index.html

How Does the Coronavirus Affect Different Age Groups?

Breakdown of confirmed coronavirus cases by age in South Korea and Italy (in percent)

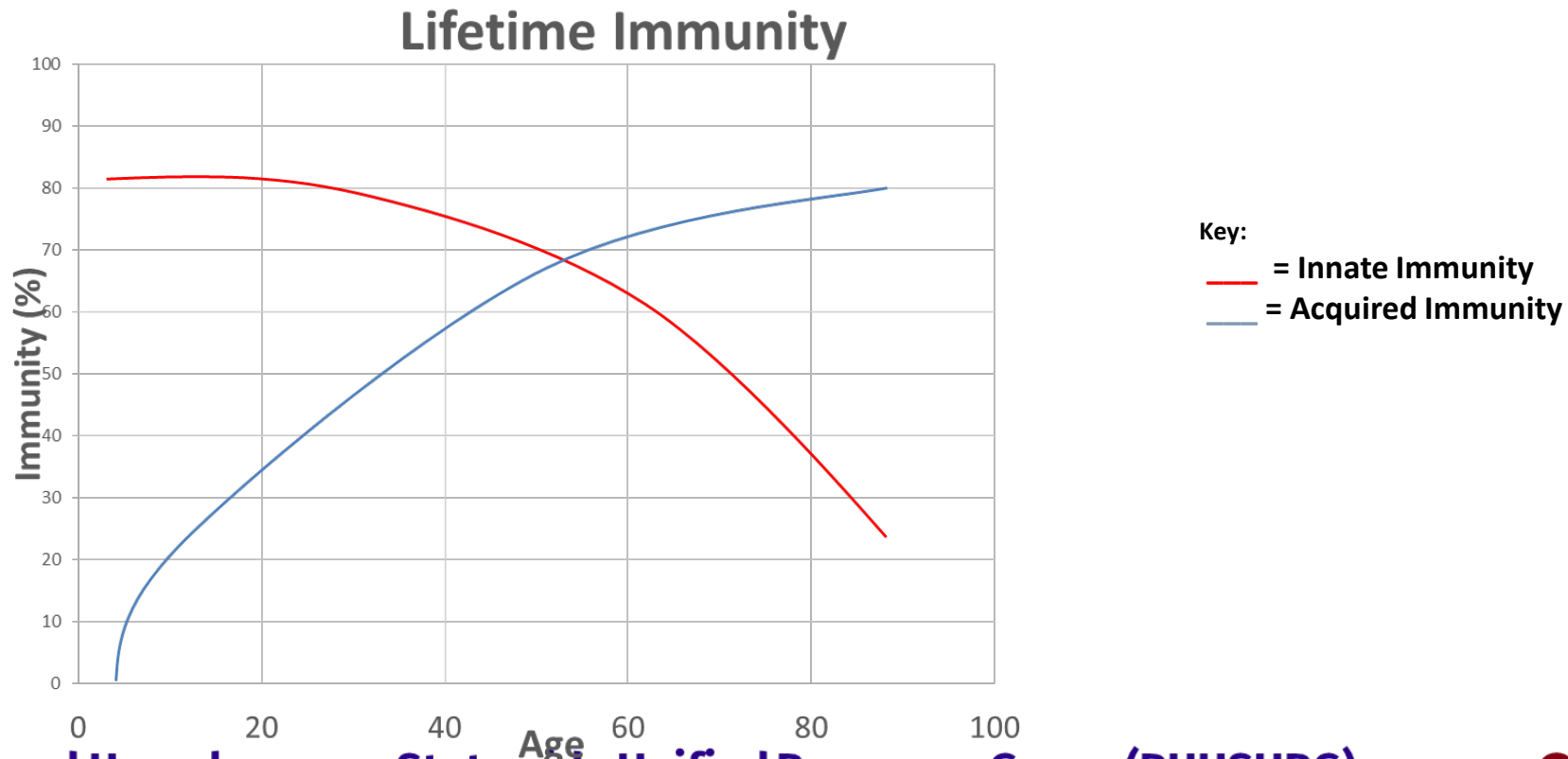


Published March 13

Source: Andreas Backhaus (German Federal Institute for Population Research) via Medium

Covid-19 Prognosis and Age

- Age independent RF
 - CFR increase with age
 - More underlying health conditions with age does not fully account for increase
 - Functional reserve capacity of lungs decrease with age
 - Innate vs Acquired Immunity



Covid-19 Three U.S. Hot Spots

Region	Covid +	Hosp	ICU	Deaths	Recover
United States	140,000			2500	4500
NY (20 M)	60,000	8,500	2100	1000	
NYC (8 M)	34,000	6,000	1300	800	
LA (4 M)	3600	1100	380 (Vent)	150	
New Orleans (400 K)	1400			75	
Jefferson + Orleans Parish (830 K)	2200			100	
WA (8 M)	4400			200	
King County (2 M, Seattle)	2200			140	
Hawaii (1.4 M)	151	12		0	

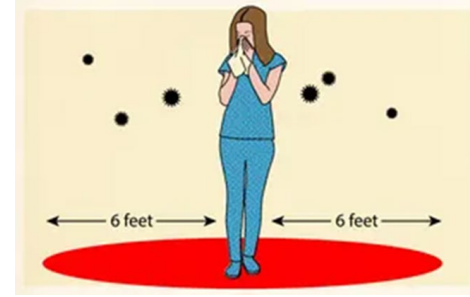
Other Hot Spots: NJ. Detroit, MI.

King County (Seattle): Deaths: 115 / 141 = Age > 70 yo. Life Care Nursing Facility: Fatalities (34/81 residents, 0/47 staff)

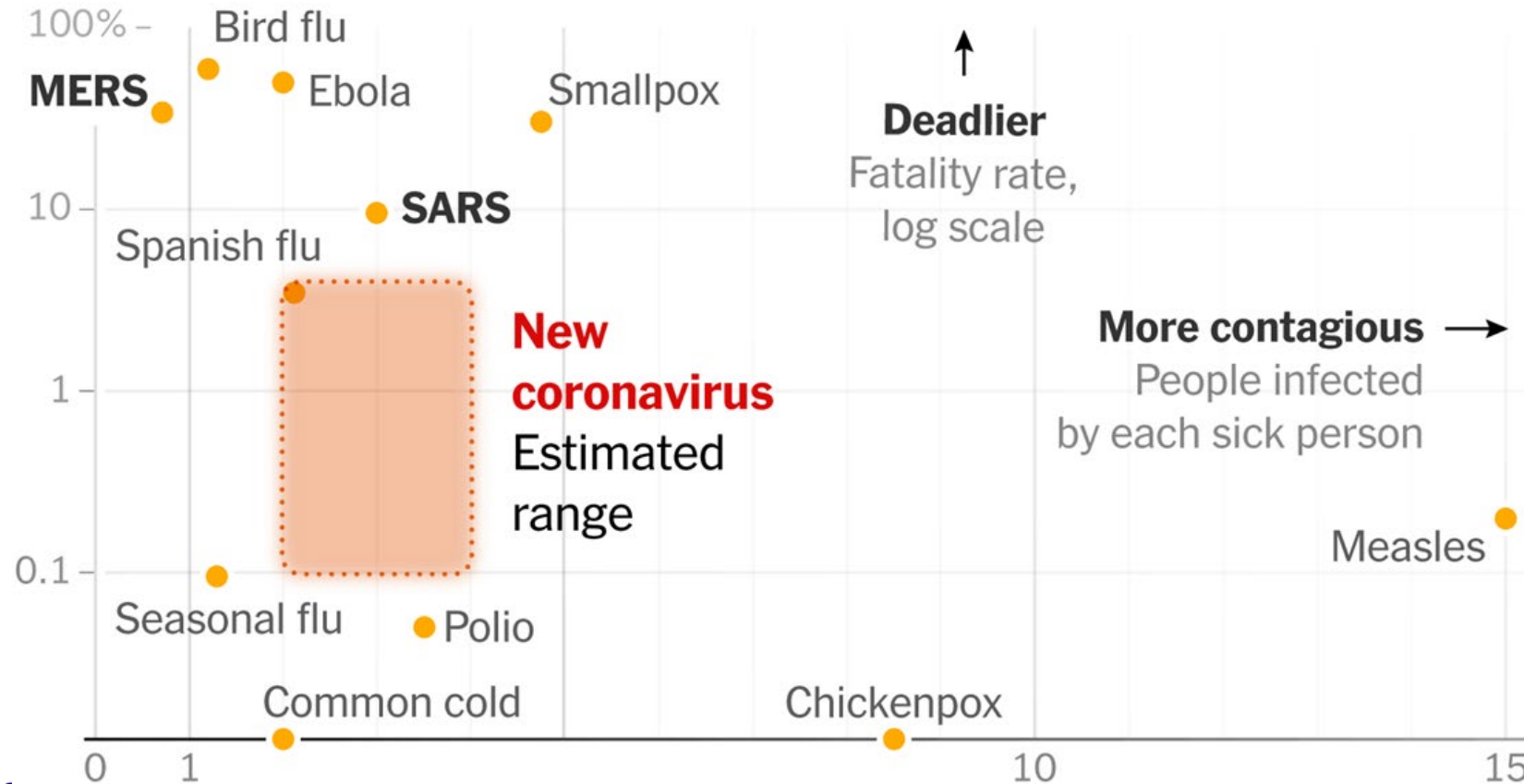
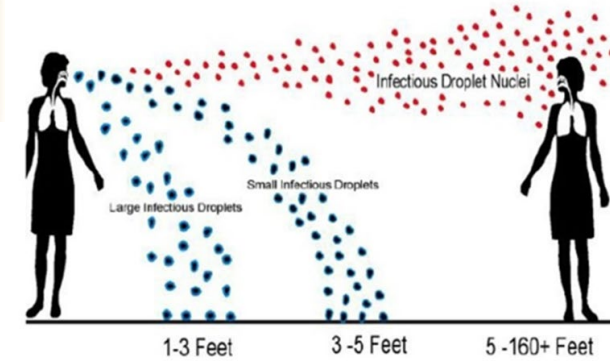
WA: 80% deaths in Age > 70.

NY: Age > 75 yo are only 8 % cases, but 50 % hosp and ¾ Fatalities. 83% hosp > 65 yo.

SARS-CoV-2 Infectivity



Infectious Droplets & Droplet Nuclei travel lengths



Children and Coronavirus

- Children 3 A's: **Allergies**, Atopic dermatitis (Eczema, Rash), **Asthma**



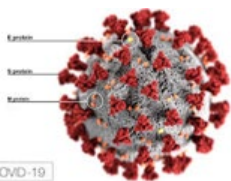
-19 UPDATE



Andrew was infected with the virus when he was skiing in Italy

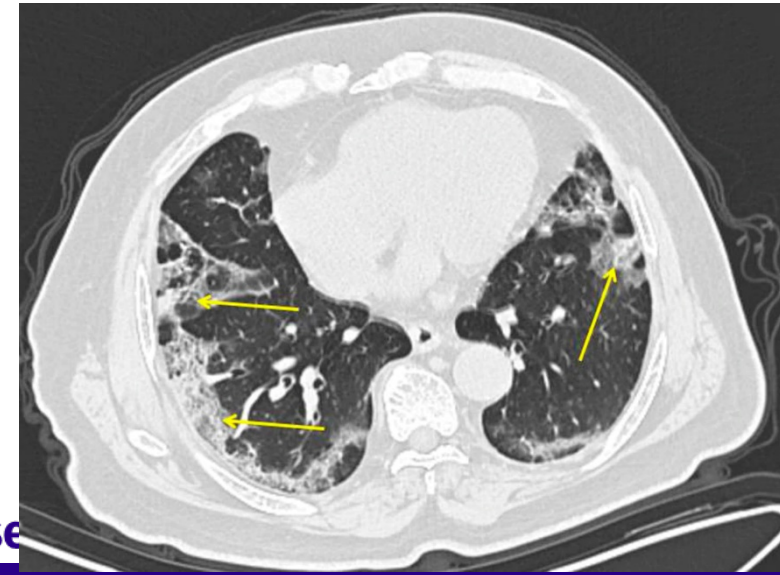
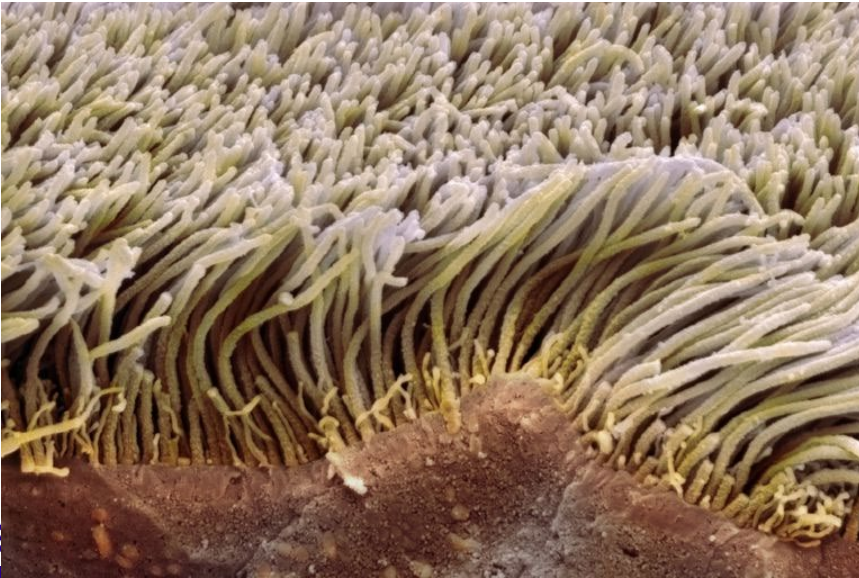


(clockwise top left) Elizabeth Schneider (Seattle , age 37), Jaimuay Sae-Ung (Thailand after visit to Wuhan, age 73), Bridgett Wilkens (Australia after attending wedding in Singapore, age 29) and Andrew O'Dwyer (UK after ski trip to Italy, age 52)
All had firsthand experience with Covid-19.



Covid-19: Tobacco, Vaping, Marijuana

- Hubei Province: Tobacco (2.4 x) more likely require ICU/Vent
- U.S.: Vaping RF younger adults (20-44) require Hosp
- Destroys cilia in lung tissue which help clear virus,
 - Decrease clearance of other pathogens, higher risk secondary respiratory infections
 - Influenza, bacterial/viral pneumonia, TB
- Smokers (14 x) more likely develop pneumonia
- Chronic Resp Disease (COPD) : Increase CFR (3 x)
- Meth: Resp binds to pulm tissue, CHF, dentition, social RF



of cases



Adapted from CDC / The Economist



Summary

- **National**
 - Children and Young Adults do very well. Increase Screening.
 - ? Seasonal, ? Geography, Healthcare Infrastructure
 - Increase Capacity: hospital/ICU beds, hosp D/C options, Vents, PPE
- **Hawaii**
 - High Testing per capita
 - High Surveillance screening by DOH
 - Leadership Aligned, Clinical Input, Ohana/Aloha
 - Influenza peaked early March and trending down
 - Strong Interventions relatively early in course of outbreak
 - Advantage Learning Curve from other states (NY, LA, WA)
- **Personal**
 - Anticipate Wave, No need to panic but need to prepare
 - You will be OK, remember the pyramid. Some others more at risk.
 - Retrospective Review a year from now. Organization, Individual.
 - The Children Are Watching

Don't Be Afraid... Be Helpful



QUESTIONS?

Next Steps

- **Check out the website for up-to-date information**
- <https://bhhsurg.hawaii.gov>
 - Still being updated and will be continuously updated
- **Next Meeting**
 - April 6th, 2020: 11:00am – 12:00pm